PTO/SB/08A (10-01)

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Complete if Known Substitute for form 1449A/PTO **Application Number** INFORMATION DISCLOSURE Filing Date STATEMENT BY APPLICANT **First Named Inventor** Art Unit (use as many sheets as necessary)

Examiner Name Attorney Docket Number of Sheet

		U.S. PATE	ENT DOCUMENTS	
	Document Number Number - Kind Code ² (if known	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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